

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**(571) 273-2885**

or **Fax**

**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

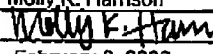
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

34456 7590 11/07/2005  
**TOLER & LARSON & ABEL L.P.**  
**5000 PLAZA ON THE LAKE STE 265**  
**AUSTIN, TX 78746**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being resimulated transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Molly K. Harrison** (Depositor's name)  
  
**February 6, 2006** (Date)

02/07/2006 TBESHAH2 00000031 500441 09768530

01 FC:1501  
02 FC:80011400.00 DA  
6.00 DA

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
09/768,530	01/24/2001	Corinna Lee	ATI010001	2404

TITLE OF INVENTION: SYSTEM FOR COLLECTING AND ANALYZING GRAPHICS DATA AND METHOD THEREOF

APPLN TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	02/07/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CRAIG, DWIN M	2123	703-022000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **TOLER, LARSON & ABEL, LLP**

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ATI Technologies, Inc.

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Toronto, Ontario, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 2/3.00 each

4b. Payment of Fee(s):

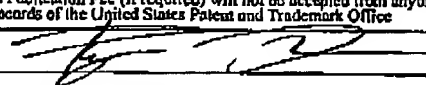
- ☐ A check in the amount of the fee(s) is enclosed  
☐ Payment by credit card Form PTO-2038 is attached  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0441 (enclose an exam copy of this form)

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature


Date February 6, 2006Typed or printed name Ryan S. DavidsonRegistration No 51,596

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**TOLER  
LARSON  
& ABEL**

**FACSIMILE COVER SHEET****DATE:** February 6, 2006**TO:** Examiner Dwin M. CRAIG **FAX NO.:** 571-273-2885  
USPTO GPAU 2123**FROM:** Ryan S. Davidson  
Reg. No.: 51,596**RE U.S. App. No.:** 09/768,530, filed January 24, 2001**Applicant(s):** Corinna LEE**Atty Dkt No.:** ATI010001 (1376-0100010)**Title:** SYSTEM FOR COLLECTING AND ANALYZING GRAPHICS DATA AND  
METHOD THEREOF**NO. OF PAGES (including Cover Sheet):** 5**MESSAGE:**

Attached please find:

- ☒ Transmittal Form (1 pg)
- ☒ Issue Fee Transmittal (1 pg) (in duplicate)
- ☒ Fee Address Indication Form (1 pg)

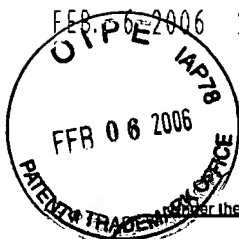
BEST AVAILABLE COPY

5000 Plaza On The Lake  
Suite 265  
AUSTIN, TEXAS 78746

Tel: (512) 327-5515  
Fax: (512) 327-5452

**CONFIDENTIALITY NOTE**

The pages accompanying this facsimile transmission contain information from the law office of Toler, Larson & Abel, L.L.P. and are confidential and privileged. The information is intended to be used by the individual(s) or entity(ies) named on this cover sheet only. If you are not the intended recipient be aware that reading disclosing copying distribution or use of the contents of this transmission is prohibited. Please notify us immediately if you have received this transmission in error at the number listed above and return the document to us via regular mail.



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0091

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission

4

Application Number

09/768,530

Filing Date

January 24, 2001

First Named Inventor

Corinna LEE

Art Unit

2123

Examiner Name

Dwin M. CRAIG

Attorney Docket Number

ATT010001 (1376-0100010)

## ENCLOSURES (Check all that apply)



Fee Transmittal Form

☐ Fee Attached


Amendment/Reply

☐ After Final

☐ Affidavits/declaration(s)


Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete Application
☐ Reply to Missing Parts  
under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a  
Provisional Application  
Power of Attorney, Revocation  
Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) \_\_\_\_\_

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board  
of Appeals and Interferences

☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify  
below):

Fee Address Indication Form (1 pg)

Remarks

CUSTOMER NO.: 34456

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

TOLER, LARSON &amp; ABEL, LLP

Signature

Printed name

Ryan S. Davidson

Date

February 6, 2006

Reg. No.

51,596

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Molly K. Harrison

Date

February 6, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY